

**National
Institute
for the Study,
Prevention and
Treatment of
Sexual Trauma**

104 E. Biddle Street
Baltimore, MD 21202
Phone: (410) 539-1661
Fax: (410) 539-1664

Progress Note

Patient Name: Mullis, Gary

Date: 4.5.94 Off Week: _____

Observations

Fred S. Berlin, BS, MA, MEd, PhD, FA

Assessment Observations

Kathryn Loomis, PhD, MS

Therapeutic

Phyllis Berlin, MA

Pamela K. Smith, MSW, LCSW

James H. Smith, MA, MEd, CPC

Andrew Smith, PhD, MS, CS

Shelly Smith, PhD, MS, CS

Katherine Smith, PhD, MA

Ronald Smith, PhD

Michael A. Smith, BS, MS

Lisa Smith, MA

Comments

H. Thomas Smith, PhD, JACS

Recommendations

Gregory Smith, PhD

Recommendations

Phyllis Smith, MA

Assessment Observations

Maggy Smith

Sharon Smith

Recommendations

Child Legal Counsel

Wendy Smith, PhD, BS, JD

Legal Observations

William Smith

John Smith, PhD

Carl Smith, BS

Richard Smith, PhD

Conrad Smith, PhD

James Smith, PhD

H. Thomas Smith, PhD, JACS

John A. Smith, PhD, JACS

David Smith, PhD

A. Thomas Smith, PhD

Roy Smith, PhD

Wendy Smith, PhD, BS, JD

Therapeutic

Phyllis Smith, MA

Maggy Smith

Sharon Smith

William Smith

John Smith, PhD

P. Smith, PhD, JACS

David Smith, PhD

A. Thomas Smith, PhD

Roy Smith, PhD

Wendy Smith, PhD, BS, JD

John A. Smith, PhD, JACS

Pt. reports general status is adequately stable. He denies inappropriate urges/ cognitions. Pt. hopes for an increase of hrs. on temporary position. He continues to struggle w. letting go of past memories & images of security. Pt. worries about future loss, pain & uncertainty. He remains generally anxious & depressed. Pt. denies suicidal ideation. He also analyzed how @ age 39 1/2 his sexual drive greatly increased. This is viewed as one element related to the abuse of his son. No other problems were presented. Will continue to follow case.

Therapist: Joseph J. Schumanek MA, NCC, CPC, BA.

000326

**National
Institute
for the Study,
Prevention and
Treatment of
Sexual Trauma**

104 E. Biddle Street
Baltimore, MD 21202
Phone: (410) 539-1661
Fax: (410) 539-1664

Progress Note

Patient Name: Mullis, Gary

Date: 12/28/93

Off Week: _____

Director:

Fred S. Berlin, BS, MA, MD, PhD, PA

Associate Director:

Kathryn Thomas, RN, MS

Therapists:

Phyllis Burke, MA
Pamela Cude, MSW, LCSW
Joseph Fuhrmaneck, MA, NCC, CPC
Andrea Kelsa, RN, MS, CS
Shelly Lurie, RN, MS, CS
Katherine Meyers, BA, MA
Randi Miller, PhD
Michele A. Muhzini, BS, MS
Lisa Rosen, MA

Consultant:

H. Martin Malin, PhD, FACC

Research Associate:

Greg Kahne, PhD

Research Assistant:

Patricia Anthony, BA

Administrative Staff:

Maggie Rider
Sharon Dean
Bernadine Missouri

Chief Legal Counsel:

Mary Ann Berlin, RN, BS, JD

Board of Advisors:

William Ariz
Judith Becker, PhD
Gail Berendzen, BS
Richard Berendzen, PhD
Gerald Boyle, Esq.
James Brening, PhD
H. Jerome Briscoe, III, Esq.
James L. Cavanaugh, Jr., MD
David Finkelshtor, PhD
A. Nicholas Groom, PhD
Roy Hazenwood, MS
Wayne P. Hunt, EdD, NCSP
Thomas Kirk
Fay Honey Knopp
Richard Lawlor, Esq.
Michael Melshamer
Hon. Thomas J. Middleton
Jerome G. Miller, DSW, LCSW
John C. Nemhan, MD
P. Gayle O'Callaghan, PsyD
Jonas Rapoport, MD
Robert L. Spitzer, MD
Gary Ticknor, Esq.
Frank L. Valcor, MD
Henry N. Wagner, Jr., MD
Phyllis Ward, BA, MAT

It is caused due to poor driving conditions (snow). To see 1st...

Therapist: Joseph Fuhrmaneck

MA, NCC, CPC, PA.

000327

**National
Institute
for the Study,
Prevention and
Treatment of
Sexual Trauma**

104 E. Biddle Street
Baltimore, MD 21202
Phone: (410) 539-1661
Fax: (410) 539-1664

Progress Note

Patient Name: Mullis, GARY

Date: 4.18.94

Off Week: _____

Director:

Fred S. Berlin, BS, MA, MD, PhD, PA

Associate Director:

Kathryn Koenig, PhD, MS

Therapists:

PHYBIS GARCIA, MA

Patricia Glick, MSW, LCSW

Christine Hershberger, MA, MEd, CPC

Andrea Johnson, PhD, MS, CS

Sherry Kline, PhD, MS, CS

Christine Koenig, PhD, MA

Robert Kline, PhD

Martha A. Mumford, BS, MS

Lisa Rasmussen, MA

Counselors:

H. Morgan Adams, PhD, LACCS

Receptionist/Assistant:

Greg Kline, PhD

Receptionist/Assistant:

Patricia Johnson, PhD

Administrative Staff:

Maggy Glick

Sherry Kline

Christine Koenig

Child Abuse Counselor:

Mary Ann Glick, PhD, MS, JD

Staff of Admissions:

Whisper Glick

Julia Glick, PhD

Carl Glick, PhD

Richard Glick, PhD

Christine Glick, PhD

Christine Glick, PhD

H. Morgan Adams, PhD, LACCS

James A. Glick, PhD, MS

Christine Glick, PhD

Paul Glick, PhD, MS

William P. Glick, PhD, LACCS

Theresa Glick

Fay Glick, PhD

Richard Glick, PhD

Christine Glick, PhD

H. Morgan Adams, PhD, LACCS

James A. Glick, PhD, MS

Christine Glick, PhD

Paul Glick, PhD, MS

William P. Glick, PhD, LACCS

Theresa Glick

Fay Glick, PhD

Richard Glick, PhD

Rt. is seen for individual Tx. session. He reports general stress @ best is adequately stable. He denies inappropriate urges / cognitions. Rt. has been using his personal journal to express himself. Anxiety is generally elevated due to job insecurity & forthcoming trial. Reports depression varies; headaches & nausea are increased.

He has only worked two days last wk. & continues to seek other employment opportunities i.e. Groom service station.

Rec. Rt. begin relaxation & physical exercise program.

He continues to display concern for his son & ex-wife. Rt. struggles in "accepting he has sexually abused his son".

We began to evaluate some of the factors related to ^{AN} increased & excessive sex drive. (COVER)

Therapist: Joseph J. Glick, MA, NCC, CPC, RPT

000328

**National
Institute
for the Study,
Prevention and
Treatment of
Sexual Trauma**

104 E. Biddle Street
Baltimore, MD 21202
Phone: (410) 539-1661
Fax: (410) 539-1664

Director:

Fred S. Berlin, BS, MA, MD, PhD, PA

Associate Director:

Kathryn Thomas, RN, MS

Therapists:

Phyllis Burke, MA
Pamela Cade, MSW, LCSW
Joseph Fuhrmanek, MA, NCC, CPC
Andrea Kelso, RN, MS, CS
Shelly Lurie, RN, MS, CS
Katharine Meyers, BA, MA
Randi Miller, PhD
Mutae A. Mulazim, BS, MS
Luis Rosali, MA

Consultant:

H. Martin Malin, PhD, FACC

Research Associate:

Greg Levine, PhD

Research Assistant:

Patricia Anthony, BA

Administrative Staff:

Maggie Rider
Sharon Dean
Bernadine Missouri

Chief Legal Counsel:

Mary Ann Berlin, RN, BS, JD

Board of Advisors:

William Ariz
Judith Becker, PhD
Gail Berendzen, BS
Richard Berendzen, PhD
Gerard Boyle, Esq.
James Breiling, PhD
H. Jerome Briscoe, III, Esq.
James L. Cavanaugh, Jr., MD
David Finklehor, PhD
A. Nicholas Groth, PhD
Roy Hazelwood, MS
Wayne P. Hunt, EdD, NCSP
Thomas Kirk
Fay Honey Knopp
Richard Lawlor, Esq.
Michael Melshomer
Hon. Thomas J. Middleton
Jerome G. Miller, DSW, LCSW
John C. Nemah, MD
P. Gayle O'Callaghan, PsyD
Jonas Rapoport, MD
Robert L. Spitzer, MD
Gary Ticknor, Esq.
Frank L. Valcor, MD
Henry N. Wagner, Jr., MD
Phyllis Ward, BA, MAT

Progress Note

Patient Name: Mullis, GARY

Date: 12/14/93

Off Week: _____

Pt. reports general status is adequately stable. He denies inappropriate urges/cognitions. He continues to struggle as he attempts to analyze why he molested his son. He continues to hold mild to moderate depression & shame & self anger. He is pleased to have had a supervised visit w/ his son after a 3wk period. He & the step mother remain friendly. He continues to hold onto the hope of reuniting his family. He had a job interview today which "went well". He has another tomorrow & is a bit hopeful about same. No other problems were presented. Will continue to follow case.

Therapist: Joseph Fuhrmanek

MA, NCC, CPC, PA.

000329

National
Institute
for the Study,
Prevention and
Treatment of
Sexual Trauma

104 E. Biddle Street
Baltimore, MD 21202
Phone: (410) 539-1661
Fax: (410) 539-1664

Progress Note

Patient Name: Mullis, GARY

Date: 12.21.93

Off Week: _____

Director:

Fred S. Berlin, BS, MA, MD, PhD, PA

Associate Director:

Kathryn Thomas, RN, MS

Therapists:

Phyllis Burke, MA

Pamela Cude, MSW, LCSW

Joseph Fuhrmaneck, MA, NCC, CPC

Andrea Kelson, RN, MS, CS

Shelly Lurie, RN, MS, CS

Katherine Mayers, BA, MA

Randi Miller, PhD

Milos A. Mulazim, BS, MS

Lisa Rosell, MA

Counselor:

H. Martin Malin, PhD, FACCIS

Research Associate:

Greg Levine, PhD

Research Assistant:

Patricia Anthony, BA

Administrative Staff:

Maggie Rider

Sharon Dean

Bernadine Missouri

Chief Legal Counsel:

Mary Ann Berlin, RN, BS, JD

Board of Advisors:

William Ariz

Judith Becker, PhD

Carl Berendzen, BS

Richard Berendzen, PhD

Gerald Boyle, Esq.

James Breking, PhD

H. Jerome Briscoe, III, Esq.

James L. Cavanaugh, Jr., MD

David Finklenor, PhD

A. Nicholas Groth, PhD

Roy Hazenwood, MS

Wayne P. Hunt, EdD, NCSP

Thomas Kirk

Fay Honey Knopp

Richard Lawlor, Esq.

Michael Melshomer

Hon. Thomas J. Middleton

Jerome G. Miller, DSW, LCSW

John C. Newman, MD

P. Gayle O'Callaghan, PsyD

Jonas Rapoport, MD

Robert L. Spitzer, MD

Gary Ticknor, Esq.

Frank L. Valcor, MD

Henry N. Wagner, Jr., MD

Phyllis Ward, BA, MAT

Rt reports general status is stable. He denies inappropriate urges/cognitions. Rt. is helping his church & community projects. He had two interviews. Last wk. E is waiting on a response. Rt. did have a supervised visit w/ his son which went well. This is a difficult time for Gary. He is trying to work through feelings of self hate & guilt. Rt. continues to evaluate factors related to his past sexual behavior i.e. high levels of stress, failed marriage & isolation. No other problems were presented. Will continue to follow case.

Therapist: Joseph Fuhrmaneck MA, NCC, CPC, PA.

000330

**National
Institute
for the Study,
Prevention and
Treatment of
Sexual Trauma**

104 E. Biddle Street
Baltimore, MD 21202
Phone: (410) 539-1661
Fax: (410) 539-1664

Director:

Fred S. Berlin, BS, MA, MD, PhD, PA

Associate Director:

Kathryn Thomas, RN, MS

Therapists:

Phyllis Burke, MA
Pamela Cade, MSW, LCSW
Joseph Fuhrmaneck, MA, NCC, CPC
Andrea Keiso, RN, MS, CS
Shelly Lurie, RN, MS, CS
Katherine Meyers, BA, MA
Randi Miller, PhD
Mulee A. Mulazim, BS, MS
Luis Roselli, MA

Consultant:

H. Martin Malin, PhD, FACC

Research Associate:

Greg Lehne, PhD

Research Assistant:

Patricia Anthony, BA

Administrative Staff:

Maggie Ruler
Sharon Dean
Bernadine Missouri

Chief Legal Counsel:

Mary Ann Berlin, RN, BS, JD

Board of Advisors:

William Ariez
Judith Becker, PhD
Gail Berendzen, BS
Richard Berendzen, PhD
Gerald Boyle, Esq.
James Breiling, PhD
H. Jerome Briscoe, III, Esq.
James L. Cavanaugh, Jr., MD
David Finklehor, PhD
A. Nicholas Groth, PhD
Roy Hazelwood, MS
Wayne P. Hunt, EdD, NCSP
Thomas Kirk
Fay Honey Knopp
Richard Lawlor, Esq.
Michael Melshemmer
Hon. Thomas J. Middleton
Jerome G. Miller, DSW, LCSW
John C. Nemah, MD
P. Gayle O'Callaghan, PsyD
Jonas Rapoport, MD
Robert L. Spitzer, MD
Gary Ticknor, Esq.
Frank L. Valcor, MD
Henry N. Wagner, Jr., MD
Phyllis Ward, BA, MAT

Progress Note

Patient Name: Mullis, GARY

Date: 12.7.93 Off Week: _____

Pt. reports general status is adequately stable. He denies inappropriate urges/cognitions. Pt. is a bit hopeful as he has two job interviews next wk. He is angry w/ wife for not allowing him to see his son. Pt. feels manipulated. He is sad & angry w/ himself for being "the cause of the problem". The holidays are difficult for him. Pt. finds some support by his church participation. No other problems were presented. Will continue to follow case.

Therapist: Joseph Fuhrmaneck MA, NCC, CPC, PA.

000331

National
Institute
for the Study,
Prevention and
Treatment of
Sexual Trauma

104 E. Biddle Street
Baltimore, MD 21202
Phone: (410) 539-1661
Fax: (410) 539-1664

Progress Note

Patient Name: Mullis, Gary

Date: 4.4.94

Off Week: _____

Diagnosis

Fred S. Butler, BS, MA, MEd, PhD, PA

Assessment/Intervention

Kathleen Edwards, MA, MS

Treatment

Phyllis Butler, MA

P. James Butler, MSW, LCSW

OSCAR PETERSON, MA, RCC, CPC

Arden Butler, MA, MS, CS

Shelly Butler, MA, MS, CS

Kathleen Edwards, MA, MA

Randy Butler, PhD

Marianne A. Mullis, BS, MS

Lisa Butler, MA

Consultation

M. Marion Butler, PhD, EAGLE

Referral/Intervention

Greg Butler, PhD

Referral/Intervention

Patricia Butler, MA

Assessment/Intervention

Margaret Butler

Sharon Butler

Referral/Intervention

Child Legal Consultant

Mary Ann Butler, MA, BS, JD

Legal Consultant

William Butler

Judith Butler, PhD

Carl Butler, BS

Richard Butler, PhD

Greg Butler, MA

James Butler, PhD

M. Marion Butler, MA, MA

James A. Butler, MA, MA

David Butler, PhD

A. Butler, PhD

Roy Butler, MA

Walter P. Butler, MA, NCCP

Treatment

Fay Butler, MA

Richard Butler, MA

Marianne Butler

Maria Butler, MA

James A. Butler, MA, MA

Judy Butler, MA

P. James Butler, MA

James Butler, MA

Richard Butler, MA

Greg Butler, MA

Fay Butler, MA

William Butler

Sharon Butler

P.1 of P.3

Pt. is seen for individual treatment session. He reports general status is adequately stable. Pt. denies inappropriate urges/ cognitions.

He has secured a part time temporary position [redacted] and is hopeful about same.

Home area is stable, however stressful as Pt. & father await his May 12, 1994 hearing.

Pt. completed treatment list & used his personal journal.

He reports depression varies. Anxiety is present.

Pt. continues to struggle w/ his decision to d/c marriage after 10 yrs. He has not had the opportunity to express his remorse to her which troubles Pt. He did evaluated the poor

communication problem & isolation during the marriage as factors related to his behavior.

Pt. continues to have difficulty accepting the loss of "lifestyle" & uncertainty of his future.

Therapist: Joseph Lubmaneck MA, NCC, CPC, BA.

000332

National
Institute
for the Study,
Prevention and
Treatment of
Sexual Trauma

104 E. Diddle Street
Baltimore, MD 21202
Phone: (410) 539-1661
Fax: (410) 539-1664

Progress Note

Patient Name: Mullis, Gary

Date: 4.4.94

Off Week: _____

Director

Fred E. Burke, BS, MA, MEd, PhD, PA

Associate Director

Kathleen Korman, MA, MS

Therapists

Physical Abuse, MA

Patricia Smith, MSW, LCSW

James P. Smith, MA, NCC, CPC

James Smith, MA, MS, CS

Shelly Smith, MA, MS, CS

Kathleen Korman, MA, MA

Randy Smith, PhD

Michael A. Smith, BS, MS

Uma Smith, MA

Counselors

M. Smith, MA, PhD, EAGLE

Program Directors

Greg Smith, PhD

Program Directors

Patricia Smith, MA

Administrative Staff

Marjorie Smith

Sharon Smith

Administrative Staff

Chad Smith, MA

Wendy Smith, MA, BS, JD

Board of Advisors

Wendy Smith

James Smith, PhD

Greg Smith, BS

Richard Smith, PhD

Greg Smith, MA

James Smith, PhD

M. Smith, MA, PhD, EAGLE

James A. Smith, MA

David Smith, PhD

A. Smith, MA, PhD

Pat Smith, MA

Wendy P. Smith, PhD

Therapists

Fay Smith, MA

Richard Smith, MA

Marjorie Smith

Wendy Smith, MA

James A. Smith, MA

P. Smith, MA, PhD, EAGLE

James Smith, PhD

Richard Smith, PhD

Greg Smith, MA

Fay Smith, MA

Wendy P. Smith, PhD

James A. Smith, MA

cont. P.2 of P.2
H. reviewed in detail the 1st instance of sexual abuse in his adopted son. H was 40y/o & the boy was 6y/o. We also evaluated the questionable & inappropriate behaviors which served as a precursor to the abuse.

The H. would take a shower in the boy's room to save time in the evening. At times he would feel uncomfortable in same. Especially on the occasions H. had an erection during the washing of his son's genitalia. This activity started 1 1/2 to 2 MTHS. prior to the abuse.

It was soon after that the son asked H. if he could sleep in him "as he didn't want to be in a dark room". The boy then asked H. if he (H.) would perform fellatio. This shocked H. & he initially replied "no ... that this was not right". Later that pm he (H.) agreed to the behavior. H. did masturbate as he performed oral sex on the boy.

Therapist: Joseph Fuhrmanek MA, NCC, CPC, PA

000333

National
Institute
for the Study,
Prevention and
Treatment of
Sexual Trauma

104 E. Biddle Street
Baltimore, MD 21202
Phone: (410) 539-1661
Fax: (410) 539-1664

Progress Note

Patient Name: Hullis, Gary

Date: 4.4.94

Off Week: _____

Diagnosis
Fried S. Berlin, BS, MA, MD, PhD, FA

Assessment Services
Kathryn Ingram, MA, MS

Therapists
Phyllis Green, MA
P. James Green, MSW, LCSW
Joseph Green, MA, NCC, CPC
Andrew Green, MA, MS, CS
Sherry Green, MA, MS, CS
Kathleen Green, MA, MA
Randy Green, PhD
Marilyn A. Green, BS, MS
Lynn Green, MA

Consultants
H. Martin Green, PhD, FACC

Referrals Services
Greg Green, PhD

Referrals Services
Patricia Green, BA

Administrative Staff

Margie Green

Sharon Green

Bernadette Green

Child Legal Services
Mary Ann Green, MA, BS, JD

Legal Services

William Green

Julius Green, PhD

Carl Green, BS

Richard Green, PhD

Carol Green, PhD

James Green, PhD

H. Joseph Green, MA, MS

James A. Green, MA, MS

David Green, PhD

A. William Green, PhD

Roy Green, MA

Wayne P. Green, PhD, NCC

Therapists

Fay Green, PhD

Richard Green, PhD

Margaret Green

Norma Green, MA, MS

Joseph A. Green, PhD, NCC

James A. Green, MA

P. James Green, PhD

James Green, MA

Richard Green, PhD

Carol Green, PhD

James A. Green, PhD

Wayne P. Green, PhD, NCC

Therapists

cont. P.3 & P.3
H. afterwards felt guilt, shame & remorse. He did not discuss the issue w/ anyone. Two days later H. engaged in behavior again w/ the boy. H. felt that "it was then too late to stop behavior".
No other problems were presented during the session. To see for individual session in 2 wks..

Therapist: Joseph Green, MA, NCC, CPC, PA

000334

G. Hollis
4.4.94

TREATMENT GOALS

TO HELP DETERMINE WHAT CAUSED THE SEXUAL
DISORDER AND DETERMINE HOW IT RELATES
TO OTHER CASES & CONTROL OF URGES.

HELP TO ENCOURAGE SELF CONFIDENCE & BETTER
TO DEAL WITH - DIGNITY & SELF PRIDE
TO OVERALL PROMOTE POSITIVES - IN OVERALL
PHYSICAL & MENTAL ASPECTS OF FUTURE
GOALS

DETERMINE WHAT COMMUNICATIONS CAN BE
ESTABLISHED TO REVERSE - FAMILY FEELINGS
& FRIENDS TO BEST WORK TO ACCOMPLISH
GOALS -

DETERMINE HOW TO TAKE WHAT HAS HAPPENED
AND HOW TO APPLY IT FROM BEING A
COMPLETE DISASTER TO PROVING TRUST

National
Institute
for the Study,
Prevention and
Treatment of
Sexual Trauma

104 E. Biddle Street
Baltimore, MD 21202
Phone: (410) 539-1661
Fax: (410) 539-1664

Progress Note

Patient Name: Mullis, GARY

Date: 3.22.94

Off Week: _____

Director

Fred S. Berlin, BS, MA, MD, PhD, PA

Associate Director

Kathryn Loomis, RN, MS

Therapists

Phyllis Burke, MA

Patricia Gault, MSW, LCSW

Joselyn Furman, MA, NCC, CPC

Andrew Rosen, RN, MS, CS

Sherry Latta, RN, MS, CS

Laurie Stevens, BA, MA

Randy Miller, PhD

Wayne A. Mulvaney, BS, MS

Lisa Rosen, MA

Counselors

H. Karen Baker, PhD, FACS

Research Assistant

Greg Baker, PhD

Research Assistant

Patricia Anthony, BA

Administrative Staff

Margie Gledhill

Sharon Gledhill

Debra M. Mendenhall

Child Abuse Specialist

Mary Ann Baker, RN, BS, JD

Board of Advisors

William Aron

Julius Baker, PhD

Carl Berman, BS

Richard Berman, PhD

Carol Hays, Esq.

James Hays, PhD

H. Jonathan Rosen, M. Ed.

James L. Cunningham, Jr., MD

David Friedman, PhD

A. Kenneth Green, PhD

Ray Hirschman, MS

Wayne P. Hunt, EdD, NCCP

Theresa Hunt

Fay Hays, Esq.

Richard Lerner, Esq.

Matthew Lerner

Hon. Thomas J. Matthews

James G. Miller, DSW, LCSW

John G. Mullen, MD

P. David O'Connell, PhD

John Rosenbaum, MD

Richard A. Rosen, MD

Gary Rosen, Esq.

Frank A. Rosen, MD

Harold A. Rosen, MD

Patricia Rosen, BA, MS

Pt. reports general status is adequately stable. He denies inappropriate urges / convictions. Pt continues to seek employment. He did not receive the position @ the Port Authority Admin. & feels disappointed about same. Pt reports a slight decrease in anxiety generally.

He visited his son SAT. which went well. Pt received his report abuse with child, holding remorse, shame & guilt. He further evaluated his current loneliness & a desire for an adult female partner. No other problems were presented. Will continue to follow case.

Therapist: Joseph Furman, MA, NCC, CPC, BA

000336

PATIENT NAME:

Gary Mulliss

DATE: 7-27-93

Group:

Weekly Patient Meeting Notes

This note is a result of the weekly patient
policy meeting:

Gary Mulliss: Evaluated by Kate on 7/20/93. Has diagnosis of 302.20M
Adjustment Disorder. Needs to be assigned to a group.
Assigned to Joe's group.

Sharon A. [Signature]
Clinical Coordinator

PATIENT NAME

DATE :

7/31/95

for addressograph plate

FORM J JHH-15-291160 (04-30-90)

000338

The National Institute For The Study

Prevention and Treatment of Sexual Trauma

PATIENT NAME:

Mullis, Gary

DATE:

8.10.93

Date	Time	
		The attending physician was available and continues to provide supervision for the patients on an ongoing basis.
		Progress Note (Initial Note) <input type="checkbox"/> Off Week
		<p>Pls seen for initial group therapy session. His formal evaluation is not available. He is a 414% Separated wnt ♂ & a 64% Adopted son (Victim). The boy is Pls. deceased sisters child. The sexual abuse occurred for 7 Mths. between 1992-93. Pls. has no prior Hx. of pedophilia. He feels that he may have been abused during childhood. Pls. was employed in Law enforcement for 13 & 14 yrs.. He describes his childhood as traumatic. Pls. also states that prior to his abuse of son his marriage was dysfunctional & sexual & communication problems.</p> <p>Pls. awaits trial in above issue. MSE: He is depressed. Denies present suicidal ideation. Pls. states he is "broken, destroyed, that he lost home, family & friends".. His psychological presentation was currently clear except for above noted depression. Will</p> <p>Therapist Signature <u>J. Juhmaneck MA, NCC, CPC..</u></p> <p>continue to monitor his status. To see in 000339</p>

The National Institute For The Study

Prevention and Treatment of Sexual Trauma

Weekly Patient Meeting NotesPATIENT NAME: Gary MullissDATE: 8-17-93

Group:

This note is a result of the weekly patient
policy meeting:

Gary Mulliss: Evaluated by Kate on 7/20/93. Has diagnosis of 302.20M
Adjustment Disorder. Needs to be assigned to a group.
Assigned to Joe's group.
Attended Joe's group.

Sharon A. [Signature]
Clinical Coordinator

National
Institute
for the Study,
Prevention and
Treatment of
Sexual Trauma

104 E. Biddle Street
Baltimore, MD 21202
Phone: (410) 539-1661
Fax: (410) 539-1664

Progress Note

Patient Name: Mullis, Gary

Date: 3.29.94 Off Week: _____

Director:

Fred S. Berlin, BS, MA, MD, PhD, FA

Associate Director:

Kathryn Thomas, RN, MS

Therapists:

Phyllis Burke, MA

Patricia Galt, MSW, LCSW

Joselyn Finkelstein, MA, NCC, CPC

Andrew Baker, RN, MS, CS

Sherry Baker, RN, MS, CS

Katherine Boyers, BA, MA

Randy Miller, PhD

Marion A. Murray, BS, MS

Lisa Rosen, MA

Counselors:

H. Mark Miller, PhD, FACS

Research Associates:

Greg Baker, PhD

Research Assistant:

Patricia Anderson, BA

Administrative Staff:

Maggie Reel

Sharon Green

Community Outreach:

Child Legal Counsel:

Mary Ann Stern, RN, BS, JD

Board of Advisors:

William Aron

Julia Baker, PhD

Carl Berman, BS

Ruthann Berman, PhD

Carole Davis, EdD

James Edwards, PhD

H. Jackson Edwards, III, EdD

James L. Edwards, Jr., EdD

David Finkelstein, PhD

A. Frederickson, PhD

Ray Gershman, EdD

Wayne P. Hines, EdD, NCCP

Therapists:

Fay Henry, EdD

Ruthann Berman, EdD

Michael Edwards

Norm Edwards & Associates

James G. Miller, EdD, LCSW

John G. Miller, EdD

P. Galt, EdD, NCCP

James Gershman, EdD

Robert G. Gershman, EdD

Carl Gershman, EdD

Frank G. Gershman, EdD

Marion A. Murray, EdD

Patricia Galt, EdD

Rt. Attended group Tx. session.
He reports general status is stable. Rt.
denies inappropriate urges / cognitions. He
continues to seek employment & hopes for a
position working in a warehouse. Rt.
is not in a relationship as he continues
to resolve the loss of his marriage.
He reports an increased confidence &
general optimism this pr. No other
problems were presented. Will continue to
follow case.

Therapist: Joseph Fuhrmanek MA, NCC, CPC, BA.

000342

National
Institute
for the Study,
Prevention and
Treatment of
Sexual Trauma

104 E. Biddle Street
Baltimore, MD 21202
Phone: (410) 539-1661
Fax: (410) 539-1664

Progress Note

Patient Name: Mullis, Gary

Date: 2.15.94

Off Week: _____

Director:

Fred S. Berlin, BS, MA, MD, PhD, PA

Associate Director:

Kathryn Thomas, RN, MS

Therapists:

Phyllis Burkus, MA
Pamela Cade, MSW, LCSW
Joseph Furmanek, MA, NCC, CPC
Andrea Kelsa, RN, MS, CS
Shelly Lurie, RN, MS, CS
Katherine Meyers, BA, MA
Randi Miller, PhD
Milee A. Multum, BS, MS
Luis Rosell, MA

Consultant:

H. Martin Malin, PhD, FACC

Research Associate:

Greg Levine, PhD

Research Assistant:

Patricia Anthony, BA

Administrative Staff:

Maggie Ruder
Sharon Dean
Bernadine Missouri

Chief Legal Counsel:

Mary Ann Berlin, RN, BS, JD

Board of Advisors:

William Arisz
Judith Becker, PhD
Carl Berendzen, BS
Richard Berendzen, PhD
Gerald Boyle, Esq.
James Breiling, PhD
H. Jerome Briscoe, III, Esq.
James L. Cavanaugh, Jr., MD
David Finkelman, PhD
A. Nicholas Groth, PhD
Roy Hazenwood, MS
Wayne P. Hunt, EdD, NCSP
Thomas Kirk
Fay Honey Knopp
Richard Lawlor, Esq.
Michael Melshamer
Hon. Thomas J. Mulderon
Jerome G. Miller, DSW, LCSW
John C. Nemiah, MD
P. Gayle O'Callaghan, PsyD
Jonas Rapoport, MD
Robert L. Spitzer, MD
Gary Tietner, Esq.
Frank L. Valcos, MD
Henry M. Wagner, Jr., MD
Phyllis Ware, BA, MAI

H. reports general status is marginally stable. He denies inappropriate sexual urges/cognitions. H. primary focus is his 2.18.94 hearing on the sexual abuse charges. He has been offered a plea bargain of 15 yrs. ± all but 2 yrs. suspended & 5 yrs. probation. H. is depressed. He currently denies suicidal ideation. H. is anxious & fearful about the hearing results. He remains concerned for his son & noted remorse. I reviewed the last report submitted to his attorney on 10/22/93, which presents our current thoughts on this case. This writer told H. to have the lawyer contact the Institute if we can be of help stat.. Will continue to follow case & hopefully see in 1 wk..

Therapist: Joseph Furmanek MA, NCC, CPC, PA.

000343

**National
Institute
for the Study,
Prevention and
Treatment of
Sexual Trauma**

104 E. Biddle Street
Baltimore, MD 21202
Phone: (410) 539-1661
Fax: (410) 539-1664

Director:

Fred S. Berlin, BS, MA, MD, PhD, PA

Associate Director:

Kathryn Thomas, RN, MS

Therapists:

Phyllis Burke, MA
Pamela Cude, MSW, LCSW
Joseph Fuhrmanek, MA, NCC, CPC
Andrea Kelso, RN, MS, CS
Shelly Lurie, RN, MS, CS
Katherine Meyers, BA, MA
Randi Miller, PhD
Mutee A. Mukuzim, BS, MS
Luis Rosell, MA

Consultant:

H. Martin Malin, PhD, FACCIS

Research Associate:

Greg Lehne, PhD

Research Assistant:

Patricia Anthony, BA

Administrative Staff:

Maggie Rider
Sharon Dean
Bernadine Missouri

Chief Legal Counsel:

Mary Ann Berlin, RN, BS, JD

Board of Advisors:

William Artz
Judith Becker, PhD
Gail Berendzen, BS
Richard Berendzen, PhD
Gerald Boyle, Esq.
James Breiding, PhD
H. Jerome Briscoe, III, Esq.
James L. Cavanaugh, Jr., MD
David Frisdehor, PhD
A. Nicholas Groth, PhD
Roy Hazelwood, MS
Wayne P. Hunt, EdD, NCSP
Thomas Kirk
Fay Honey Knopp
Richard Lawlor, Esq.
Michael Melsheimer
Hon. Thomas J. Middleton
Jerome G. Miller, DSW, LCSW
John C. Nemah, MD
P. Gayle O'Callaghan, PsyD
Jonas Rappeport, MD
Robert L. Spitzer, MD
Gary Ticknor, Esq.
Frank L. Valcor, MD
Henry N. Wagner, Jr., MD
Phyllis Ward, BA, MAT

Progress Note

Patient Name: Mullis, GARY

Date: 1/4/94

Off Week: _____

PT. reports general status is adequately stable. He denies inappropriate urges/ cognitions. PT reports a slight decrease in depression. He continues to seek employment w/o success. PT is frustrated about same & is having a problem w/ self rejection. He structures time via church activities & ^{AMATEUR} radio communications club. PT shared how nervous he was when he 1st. saw son after the separation from his family. He feels the supervised visits w/ his son are going well. No other problems were presented. Will continue to follow case.

Therapist: Joseph Fuhrmanek MA, NCC, CPC, PA.

000344

**National
Institute
for the Study,
Prevention and
Treatment of
Sexual Trauma**

104 E. Biddle Street
Baltimore, MD 21202
Phone: (410) 539-1661
Fax: (410) 539-1664

Progress Note

Patient Name: Mullis, Gary

Date: 3.8.94 & 3.9.94 Off Week: _____

Director:

Fred S. Berke, BS, MA, MD, PhD, PA

Associate Director:

Kathryn Thomas, RN, MS

Therapists:

Phyllis Burke, MA

Patricia Calkins, MSW, LCSW

Joseph Furmaneck, MA, MCC, CPC

Andrea Kello, RN, MS, CS

Shelly Lurie, RN, MS, CS

Katharine Meyers, BA, MA

Randy Miller, PhD

Margo A. Mulvan, BS, MS

Lisa Rosen, MA

Consultant:

H. Martin Males, PhD, FACCS

Research Assistant:

Greg Kahon, PhD

Research Assistant:

Patricia Anthony, BA

Administrative Staff:

Keeggs Fisher

Sharon Dean

Bernadine Staschun

Chief Legal Counsel:

Mary Ann Berlin, RN, BS, JD

Board of Advisors:

William Arnes

Judith Becker, PhD

Carl Bernhausen, BS

Richard Berentson, PhD

Cecilia Boyer, Esq.

James Browne, PhD

H. Jerome Burckle, III, Esq.

James L. Cavanaugh, Jr., MD

David Finkelsht, PhD

A. Hochstadt, PhD

Roy Hazzard, MS

Wayne P. Hunt, Esq., MCSP

Thomas Kirk

Fay Henry Knapp

Richard Lander, Esq.

Marceline Mendenhall

Hon. Thomas J. Middleton

Jerome G. Miller, DSW, LCSW

John C. Norman, MD

P. Gayle O'Callaghan, PhD

Jonas Rappaport, MD

Robert L. Spitzer, MD

Gary Richter, Esq.

Frank L. Valdez, MD

Henry M. Wagner, Jr., MD

Phyllis Ward, BA, MAI

Pt. reports general status is adequately stable.
He denies inappropriate urges / cognitions.
Pt. presents some anxiety & relief
since his initial hearing on 3.9.94. Currently,
he awaits a PSI & sentencing hearing on May 12, 1994.
Pt. wants to communicate w/ his wife & son
however is sensitive to their needs / feelings.
He continues to hold remorse, depression &
self anger. Pt. continues to seek employ-
ment. No other problems were presented.
Will continue to follow case.

Therapist: Joseph Furmaneck MA, MCC, CPC, BA.

000345


GARY MULLIS

July 20, 1993

IDENTIFYING
INFORMATION &
CHIEF COMPLAINT:

The patient is a 41 year old separated white male who was referred for evaluation today, July 20th, 1993 by his attorney. Mr. Mullis is accused of sexually molesting his five year old adopted son over a seven month period of time. These accusations involve genital touching and fellatio on the child. Mr. Mullis was indicted on these charges and is currently awaiting a court date. He and his wife have separated, but he has been granted temporary supervised visitations with his son.

INFORMANTS:

The informants are the patient himself and the legal records that accompany him.

FAMILY HISTORY:

Father: The patient's father is currently 70 years of age. He has diabetes that is controlled with medications and diet. The patient's father also has circulatory problems as the result of an injury years ago. The patient's father has a high school education and was employed as a steel worker for 35 years. He is currently retired. The patient described his father as "laid back". He said he is an individual who does not want to hurt anyone. He said that he and his father get along well. They are closer now than when he was younger, but he has always been closer to his father than to his mother. When he was a child, Mr. Mullis was disciplined by his mother, but not by his father. This discipline included some spankings, but generally was reprimanding or grounding.

Mother: The patient's mother is currently between 63 and 64 years of age. She lives in North Carolina and Mr. Mullis has not talked with her since 1988. His parents were divorced when he was 14 years of

and after that he lived with his father. He recalled that his parents fought much of the time. Immediately after the divorce, the patient's mother moved to Essex, Maryland and then to North Carolina. Mr. Mullis made a choice to stay with his father. He knows very little about his mother's education. He said that she had always been a housewife and has been married several times since the divorce between she and his father.

He described his mother as "an unusual person." He said that she is aggressive and rambunctious. He said that she does exactly what she wants to do, does not care if she hurts anyone and leads a very independent lifestyle. He said that he and his mother are not close and have never been. As a child he saw her every few years and continued to do so until 1988, when he made a decision not to have anything to do with her. This was because of some difficulties over an adoption that Mr. and Mrs. Mullis made of his sister's son.

Siblings: The patient had one sister who was 4 to 5 years older than he. She died in 1989. The patient said that his sister was quite obese, weighing probably 400 pounds and she took many medications. He said that the circumstances surrounding her death are unclear. She died when she was 40 and was found dead at her home. Mr. Mullis said that while growing up he and his sister were not very close, and that he had lost communication with her. He said that his mother would tell him that his sister was promiscuous and not someone with whom he would want to have a relationship. The patient said that he had believed this and had stayed away from her. She had one son who, subsequent to her death, was adopted by Mr. and Mrs. Mullis.

FAMILY HEALTH HISTORY:

The family health history is positive for diabetes in the paternal grandmother and the father. The patient denied that

there is any evidence of heart disease, cancer, hypertension within the family and stated that all of his grandparents died as the result of "old age". He denied any neurological, psychiatric or substance abuse problems within the family.

SOCIAL POSITION & HOME ATMOSPHERE:

The patient said that he was the product of a middle class family. He lived for several years in Essex, then moved to

Dundalk, Maryland, when he was six years old. He remained in Dundalk with his father until his own marriage at the age of 31. Until the age of 14, the patient lived with his father, sister and mother. After his parents divorced when he was 14 years old, he lived with his father and sister. His sister then left when she was 18, moving into her own place in North Carolina.

PERSONAL HISTORY:

Mr. Mullis was born on [REDACTED] in North Carolina. He said that both of

his parents were from that State. He denied knowing any details about his mother's pregnancy or his subsequent birth. However,

believes that he was healthy and that there were no medical problems. He also believes that he attained normal developmental milestones. He denied any history of enuresis, speech problems, phobias, or seizures. He said he had the usual childhood diseases and recalled having some ear infections and a strep throat on one occasion. He said that he was never hospitalized as a child. He did break his arm when he was between 12 to 14 years of age. Growing up, he lived in a neighborhood where there were other children with whom to play. He said that his interactions outside of his home were quite good and he was involved in the usual childhood activities such as ball playing and bike riding. He felt happy in these activities, but said there was a great deal of tension within his home.

EDUCATIONAL HISTORY: The patient began school at the age of six. He graduated from high school when he was 17 years old. He said that he got satisfactory grades, but without doing very much work. He got along well with his teachers and had many friends in school. He said that he was quite accepted, though he was not active in school activities nor in sports. He said he was communications oriented and involved in audio-visuals while in school.

OCCUPATIONAL HISTORY: The patient obtained his first jobs after graduating from high school. He said that until 1976 he moved from job to job. He had jobs such as working in burger restaurants or where ever he could find employment. In 1976 he got his first job as the head of a security department at Bon Secours Hospital, and stayed there for four years. He then went with the Baltimore City police department as a dispatcher and stayed with them for nine years. For the past four years he has worked for the Belair Police Department as a dispatcher. He was asked to resign in June as a result of the recent charges and was told that if he did not resign he would be fired. He said he had always enjoyed this type of work.

LIVING SITUATIONS: The patient lived with his father until he was 31 years of age at which time he married. He then lived with his wife and subsequently with his adopted son, as well. Since June, Mr. Mullis has lived once again with his father.

SEXUAL INCLINATIONS AND PRACTICE: The patient reported that he learned about sexuality from his peers in high school. He denied ever having had sex education and said that neither of his parents talked about sex. He believes his mother to be very judgmental and not someone he could approach. His father was far more approachable, but Mr. Mullis denied that he ever talked with him about sex. He began masturbating at the age of 13, doing so on a once a week basis. He stated that he felt no guilt about masturbation. He said that initially he did not know anything about it, but thought that

perhaps it was normal. He currently admitted to masturbating about one to two times per day.

Mr. Mullis said that he did not remember any early childhood sexual experiences. In the first grade he began to notice that he had an interest in girls and acquired a childhood sweetheart with whom he was close throughout high school. When he was 13 years old he had his first kissing experience, but does not recall any heavy petting until after high school. He said that he had difficulty getting involved with women and dated rarely during high school or afterward. He said that he has had three sexual partners including his wife, and that he had no long term relationships before meeting his wife. He could not remember when his first sexual intercourse experience was, but believed it to be while in his twenties. When he was somewhere between the ages of 12 and 14, he recalled that he and another same age boy masturbated together. This happened on one occasion. He denied any sexual experiences with adults while he was a child or adolescent, stating that he was attracted to women in their twenties to thirties. He said that he has no interest in young girls, men or young boys.

MARITAL HISTORY: The patient married his current wife, Ann, when he was 31 years old and she was 28. His wife has an Associates degree in nursing and currently works at Franklin Square Hospital. The patient said that he and his wife met through a mutual friend on a blind date. They dated for less than a year and then were married. He said that they got along quite well and had a good sexual relationship for a period of time. They developed problems with infertility and were unable to conceive a child. At one point Ann miscarried a pregnancy. The couple sought treatment at an infertility clinic and learned that one of Ann's tubes was blocked and it would be very difficult for her to conceive.

Subsequent to that diagnosis, the patient stated that his wife became less interested in sex, felt that there was no need to be sexual anymore, since reproduction was not a possibility. He said that since that time they have had infrequent sexual relations. He has found this to be very disturbing. He feels that he is unable to stimulate his wife and feels very badly about it. However, Mr. Mullis said that other aspects of their relationship remained positive until the recent difficulties.

CHILDREN: The couple have an adopted son, Travis, who is currently six years old. Travis is a natural son of Mr. Mullis's sister who died in 1989. Mr. and Mrs. Mullis adopted Travis when he was 10-1/2 months old. Travis is currently in the second grade and Mr. Mullis reports that he does well in school and seems to be well adjusted. Mr. Mullis admits to having a good relationship with his son. This is the son with whom Mr. Mullis was sexual.

HABITS: The patient began smoking cigarettes at the age of 18 and currently smokes approximately two packs of cigarettes per day. He said that he drinks alcohol approximately one time per year on a social basis, and denied that he ever became more involved in drinking, stating that he has never been much interested in this pursuit. He denied the use of any street drugs.

RELIGIOUS AFFILIATION AND INTEREST: The patient said that his parents were Protestant, although he was not raised in any particular church. His family did attend a Baptist church for a period of time. He currently attends the Eastern Assemblies on a regular basis.

PREMORBID PERSONALITY: The patient said that he has a few friends at the current time, but that most deserted him after learning about the sexual abuse. Previously, he had colleagues at work with whom he got along, but was not social. He and his wife had made friends with neighbors and others. Currently Mr. Mullis has two male friends with whom he talks and who are aware of what is going on in his life. As previously noted, Mr. Mullis has no current relationship with his mother, but said that his father is quite supportive of him. The patient's interests include communications. He is an amateur radio operator. The patient described himself as a person who is outgoing and will talk with anyone.

He said that he has always worried, but currently this tension has exacerbated. He said throughout his life he has had a normal amount of depression, but is much more severely depressed at the current time. He said that prior to the disclosure of sexual abuse he had met his goals. He enjoyed the work that he did and was happy with his marriage and his son. He currently feels uninterested in making goals for the future.

MEDICAL HISTORY: The patient said that he had a previous history of hypertension which was treated with medications. He has since stopped taking those medications and claims that he is no longer hypertensive.

PREVIOUS PSYCHIATRIC HISTORY: There is no previous psychiatric history.

LEGAL HISTORY: Mr. Mullis has no prior legal history. He was arrested for shoplifting as a juvenile. He was arrested in June of 1993 on charges of child molestation. He was indicted on these charges last week and will face a court hearing at some unknown date.

HISTORY OF PRESENT ILLNESS: The patient has been accused of and admits to sexually molesting his five year old son over an approximately seven